

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

ROBERT HAYS AULT

Case No. 15-42426

Debtor(s)

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 12/16/2015.
- 2) The plan was confirmed on 03/08/2016.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was converted on 08/21/2017.
- 6) Number of months from filing to last payment: 15.
- 7) Number of months case was pending: 21.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have not cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$3,225.00
Less amount refunded to debtor	\$11.69

NET RECEIPTS: **\$3,213.31**

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$1,699.86
Court Costs	\$0.00
Trustee Expenses & Compensation	\$140.03
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: **\$1,839.89**

Attorney fees paid and disclosed by debtor: \$1,300.14

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
AT&T	Unsecured	501.90	NA	NA	0.00	0.00
CAPITAL ONE BANK	Unsecured	1,534.98	NA	NA	0.00	0.00
CAPITAL ONE BANK	Unsecured	4,552.24	NA	NA	0.00	0.00
CHECK N GO	Unsecured	1,100.00	607.23	607.23	110.19	0.00
COMMONWEALTH EDISON	Unsecured	424.78	437.43	437.43	79.35	0.00
CREDO	Unsecured	434.06	NA	NA	0.00	0.00
EMERGENCY ROOM CARE PROVIDE	Unsecured	294.16	NA	NA	0.00	0.00
GE MONEY BANK	Unsecured	1,922.66	NA	NA	0.00	0.00
JEFFERSON CAPITAL SYSTEMS LLC	Unsecured	NA	413.91	413.91	63.98	0.00
MIDLAND CREDIT MANAGEMENT	Unsecured	5,595.87	5,864.09	5,864.09	1,064.05	0.00
MIDWEST IMAGING PROFESSIONALS	Unsecured	648.00	NA	NA	0.00	0.00
Minute Clinic Diagnostic of IL	Unsecured	89.00	NA	NA	0.00	0.00
NOVACARE REHAB	Unsecured	743.46	NA	NA	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	303.30	307.79	307.79	55.85	0.00
PRESENCE HEALTH	Unsecured	454.44	NA	NA	0.00	0.00
PRESENCE HEALTH	Unsecured	10,151.40	NA	NA	0.00	0.00
QUEST DIAGNOSTIC	Unsecured	107.23	NA	NA	0.00	0.00
Resurrection Health Care	Unsecured	11.07	NA	NA	0.00	0.00
RESURRECTION MEDICAL GROUP	Unsecured	587.28	NA	NA	0.00	0.00
RMS	Unsecured	428.07	NA	NA	0.00	0.00
WEISS MEMORIAL HOSPITAL	Unsecured	995.84	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$7,630.45	\$1,373.42	\$0.00

Disbursements:

Expenses of Administration	<u>\$1,839.89</u>
Disbursements to Creditors	<u>\$1,373.42</u>

TOTAL DISBURSEMENTS : **\$3,213.31**

12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 09/13/2017

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.